


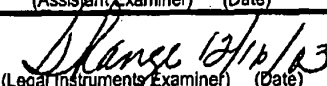
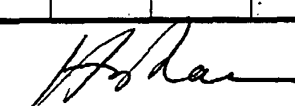
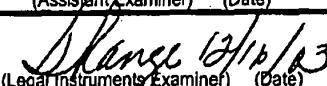
PA/DC

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>09/641137</u>	Prepared by <u>C. Jannotti</u>	Tracking Number <u>592/8.15</u>	
Examiner-GAU <u>PHAM - Q877</u>	Date <u>4/16/04</u>	Week Date <u>3/22/04</u>	
	No. of queries <u>1</u>	IFW	

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE
a. Page Missing	<p>① Index of claims has 2 claims numbered 2 and no claim 4.</p> <p>Please advise</p> <p>② Page 1 of Notice of Allowability allows claims 1-24. Page 2 of NOA cancels claims 15-34. Please correct.</p> <p>Thank you</p>
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
CLAIMS	
a. Claim(s) Missing	
b. Improper Dependency	
c. Duplicate Numbers	
d. Incorrect Numbering	
e. Index Disagrees	initials <u>CJ</u>
f. Punctuation	<p>RESPONSE</p> <p>Done!</p>
g. Amendments	
h. Bracketing	
i. Missing Text	
j. Duplicate Text	
k. Other	

Issue Classification 	Application No.	Applicant(s)	
	09/641,137	ALMOGY ET AL.	
	Examiner	Art Unit	
	Hoa Q. Pham	2877	

ISSUE CLASSIFICATION									
ORIGINAL					CROSS REFERENCE(S)				
CLASS	SUBCLASS				CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)			
356	237.1				237.4				
INTERNATIONAL CLASSIFICATION									
G	0	1	N	21/00					
				/					
				/					
				/					
				/					
					<div style="text-align: right;">Total Claims Allowed: 24</div>				
<div style="text-align: center;">  (Assistant Examiner) (Date) </div>					<div style="text-align: center;">  HOA Q. PHAM 12/11/03 (Primary Examiner) (Date) </div>				
<div style="text-align: center;">  (Legal Instruments Examiner) (Date) </div>					<div style="text-align: center;">O.G. Print Claim(s) 1</div>		<div style="text-align: center;">O.G. Print Fig. 4</div>		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1		31		91		181
2	2		32		92		182
3	3		33		93		183
4	4		34		94		184
5	5		35		95		185
6	6		36		96		186
7	7		37		97		187
8	8		38		98		188
9	9		39		99		189
10	10		40		100		190
11	11		41		101		191
12	12		42		102		192
13	13		43		103		193
14	14		44		104		194
15	15		45		105		195
16	16		46		106		196
17	17		47		107		197
18	18		48		108		198
19	19		49		109		199
20	20		50		110		200
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22	22		52		112		202
23	23		53		113		203
24	24		54		114		204
25	25		55		115		205
26	26		56		116		206
27	27		57		117		207
28	28		58		118		208
29	29		59		119		209
30	30		60		120		